PAGE 1/6

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) ARKANSAS FOR LEADERSHIP POLITICAL ACTION COMMITTEE (ARKPAC) PO BOX 1672 ADDRESS (number and street) (Check if address is changed) ALEXANDRIA 22313 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dmarley77@gmail.com (Check if address is changed) Optional Second E-Mail Address tim@kochandhoos.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.arkpac.com (Check if address is changed) DATE 07 2015 C00413948 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. HARRY D. MARLEY JR. Type or Print Name of Treasurer HARRY D. MARLEY JR. [Electronically Filed] 07 08 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
			Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ididate	Committee:	
(a)	Ц	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	ete the candidate
Nam Can	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		(National, State	Democratic, epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	o o o por a un o
/f\			roasted fund or party
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		

FEO Forms 4 (Positional A	22(2000)	Deve	2
FEC Form 1 (Revised 0 Write or Type Committee Name		Page	3
			/D / C \
	LEADERSHIP POLITICAL ACTI	<u>`</u>	<u> </u>
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising F	Representative, or Leadership PAC Sp	onsor
SEN. JOHN BOOZMA	. N 		
			<u> </u>
	PO BOX 671		
Mailing Address			
		AR 72757	
	ROGERS	AR 72757	
	CITY	STATE ZIP CODE	
Relationship: Connected	l Organization Affiliated Committee Joint Fundrai	sing Representative X Leadership PA	C Sponsor
 Custodian of Records: Ider books and records. 	tify by name, address (phone number optional) and p	osition of the person in possession of	committee
TIMOTHY	A. KOCH		
Full Name	,901 N WASHINGTON ST, STE 700		
Mailing Address			
	ALEXANDRIA	VA 22314	
Title or Position	CITY	STATE ZIP CODE	
ASSISTANT TREASURER	Telephone	number 703 - 299	8571
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of assistant treasurer).	the committee; and the name and add	dress of
	MARLEY JR.		1
of Treasurer	15602 PUTNAM RD		
Mailing Address	10002 I OTTANIA NO		
	ROGERS	AR 72756	
Title or Position	CITY	STATE ZIP CODE	
TREASURER	Telephone	number 479 - 462	8255

FEC Form 1 (Revise	ed 02/2009)			Page 4
Full Name of Designated Agent TIMOTHY	/ A. KOCH			
Mailing Address	901 N WASHINGTON ST, STE 700			
	ALEXANDRIA	VA STATE	22314	ZIP CODE
Title or Position ASSISTANT TREASURER		ımber	703	299 - 8571
safety deposit boxes or main Name of Bank, Depository,				
Name of Bank, Depository,	etc. S FARGO			
Name of Bank, Depository,	etc.			
Name of Bank, Depository,	etc. S FARGO	VA	22314	
Name of Bank, Depository,	etc. S FARGO 330 N WASHINGTON ST	VA VA STATE	22314	ZIP CODE
Name of Bank, Depository,	etc. S FARGO 330 N WASHINGTON ST ALEXANDRIA CITY		22314	ZIP CODE
Name of Bank, Depository, WELL Mailing Address Name of Bank, Depository,	etc. S FARGO 330 N WASHINGTON ST ALEXANDRIA CITY		22314	ZIP CODE
Name of Bank, Depository, WELL Mailing Address Name of Bank, Depository,	etc. S FARGO 330 N WASHINGTON ST ALEXANDRIA CITY		22314	ZIP CODE
Name of Bank, Depository, WELL: Mailing Address Name of Bank, Depository, ARVE	etc. S FARGO 330 N WASHINGTON ST ALEXANDRIA CITY etc. ST BANK 5201 VILLAGE PARKWAY	STATE		ZIP CODE
Name of Bank, Depository, WELL: Mailing Address Name of Bank, Depository, ARVE	etc. S FARGO 330 N WASHINGTON ST ALEXANDRIA CITY etc. ST BANK		22314	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı SUNTRUŞT BANK Mailing Address 30302 GΑ **ATLANTA** CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor FRIENDS OF JOHN AND ANDER 824 S MILLEDGE AVE, STE 101 Mailing Address **ATHENS** 30605 GΑ **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Connected Organization Affiliated Committee Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. I BANK OF AMERICA 600 N WASHINGTON ST Mailing Address 22314 **ALEXANDRIA** CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **BOOZMAN VICTORY 2016** 901 N WASHINGTON ST, STE 700 Mailing Address **ALEXANDRIA** 22314 **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Connected Organization Affiliated Committee Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number